

Application for Product Evaluation

The purpose of this application is to provide the Department with information about the product being submitted for evaluation. This application procedure is intended only for those products which <u>are not</u> covered by Specifications, Plans, or other Department standards. The product manufacturer or the representative shall complete the application accurately and thoroughly, and send it to the address below. The person submitting the Application for Product Evaluation will be notified by the Department as to what action it intends to take on the submitted application.

Mail Completed Application To: Special Projects Manager

Materials Laboratory

Washington State Department of Transportation

PO Box 47365

Olympia, WA 98504-7365

Name of WSDOT Staff Supplying This Form				Date
Division, Region, Branch, Section				Phone Number
Name of Person Completing This Form	Title	itle		
Phone Number (Include Area Code)	Date		☐ Mai	nufacturer
Please Answ	er All Questions. I	f Not Applicab	le, Wr	ite "NA"
Product or Trade Name				Patent Number
Manufacturer				Phone Number
Street Address				
City		State		Zip Code
Representative				Phone Number
Street Address				
City		State		Zip Code
Primary Recommended Use				

Alternate Recommended Use
Briefly Describe the Background of the Manufacturer and Product
Describe the Descript Material Environment of Descript
Describe the Product, Material, Equipment, or Process*
Describe the Material Composition*
Describe the Outstanding Features or Advantages*

Approximate Cost	(Specify Units):		Royalty Cost
\$	Per		\$
* NOTE: Produc	t Literature May Be Substituted When the I	iterature Contains All of The Rec	uested Information.
If Product, Mate Following, Iden	erial, Equipment, or Process Meets Requ tify	irements of Specifications or S	standards of One of the
AASHTO			
ASTM			
FEDERAL			
WSDOT			
NCHRP 350 Cra	ash Test Requirements		
Other			
Many Years Use (List Names, Tit	ner Agencies and Persons to Be Contacted, and Whether Use Has Been Experim tles, Mailing Addresses, and Phone Num	ental or Routine	ir it s ose, including now
Note Here and A			

riease Answer The Following by Checking All Appropriate Boxes				
☐ Yes ☐ No - Can Demonstration be Provided?				
☐ Yes ☐ No - Available Presentations Are: ☐ Movies or ☐ Training Courses				
☐ Yes ☐ No - Manufacturer Furnishes: ☐ Plans ☐ Drawings ☐ Pictures ☐ Attached ☐ To Be Mailed				
☐ Yes ☐ No - Can Material Specifications Be Furnished By Manufacturer? ☐ Attached ☐ To Be Mailed				
☐ Yes ☐ No - Are Instructions or Directions for Installation, ☐ Attached ☐ To Be Mailed Application or Use Available?				
Yes ☐ No - Is Product Availability Seasonal?				
☐ Yes ☐ No - Are Quantities Available Limited?				
☐ Yes ☐ No - Can Samples Be Provided? ☐ Free or ☐ At Cost for Laboratory Testing				
☐ Yes ☐ No - Can Samples Be Provided? ☐ Free or ☐ At Cost for Field Evaluation				
☐ Yes ☐ No - Will Manufacturer Provide Material in the Field? ☐ Free or ☐ At the Cost for Test Installation				
☐ Yes ☐ No - Is Product Guaranteed? ☐ Copy Attached ☐ To Be Mailed				
Who Recommended Contacting Washington State Department of Transportation?				
Who Else Has Been Contacted Within This Department?				
Additional Comments				